

**Jon D. Fujii**

**Experience**

10/2015 - present      Med-QUEST Division, State of HI      Honolulu, HI

**Acting Health Care Services Branch Administrator**

- Responsible for the overall management and execution of Quest Integration (QI) and other medical assistance programs, including the contracting, monitoring and oversight involved with these programs.
- Conducted monthly meetings related to the Quest Integration contract with five MCOs. Took feedback from MCOs, planned the agenda with input from the MCOs, communicated policy and program information to the MCOs, and answered questions from the MCOs.
- Led the Med-QUEST process to update Quest Integration 2015 revised capitation rates. Sent draft rates to MCOs, facilitated question/answer conference calls between state actuary and MCOs' actuaries, worked with state actuary on strategizing the MCO feedback and potential impact on draft rates, consulted with CMS on potential federal matching issues related to revised rates, communicated with administrator on status of MCO feedback and possible changes to draft rates, worked with FO to finalize rates and get Supplemental Agreement signed.
- Led similar process with the Quest Integration 2016 capitation rate setting and the CCS 2016 capitation rate setting.
- Represented HCSB at various outreach meetings related to healthcare transformation, including Hawaii Health Information Exchange integration with QI MCOs, finding a solution to Mental Health America providers experiencing a CCS enrollment 'gap' period after client transition to QI, planning and conducting annual QI waiver public forum, DOE initiative to pay in-school health aides/LPNs/RNs on a per service basis with Medicaid dollars, IAPs related to community integration with LTSS recipients and physical and mental health integration.
- Oversees a team of over thirty employees in three sections.

8/2006 – 9/2015      Med-QUEST Division, State of HI      Honolulu, HI

**Research Officer/Data Analysis & Provider Network Section Administrator**

- Led the Med-QUEST business effort to successfully convert managed care are fee-for-service lines from ICD-9 coding to ICD-10 coding. Crafted memos, reported monthly conversion status to CMS, managed system changes, designed and implemented MCO testing plans, coordinated additional CMS training for at-risk providers, and monitored go-live progress.
- Led the Med-QUEST business effort to successfully convert MCO reporting standards from X12 4010 to X12 5010, for the 834/837I/837P/NCPDP transactions. Crafted memos, monitored MCO progress, managed system changes, coordinated MCO end-to-end system testing, monitored go-live progress.
- Evaluated MCO enrollment CAP thresholds, calculated MCO pay-for-performance awards, coordinated HEDIS measure selection, reporting and validation.
- Managed the ACA mandated provider re-validation process for the Hawaii fee-for-service network. Crafted provider notice letters, managed system changes, gathered data on affected providers, coordinated team effort to process and mail out notices, trained and coached staff on ACA rules. Designed site visit evaluation forms.
- Currently responsible for a team of four employees

3/2004 – 6/2006

Hawaii Pacific Health

Honolulu, HI

**Senior Contract Reimbursement Manager**

- Directed the modeling and updating of all payer contracts for three hospitals and two doctor groups (\$1.0 billion revenue) for expected reimbursement calculations in the Avega system.
- Supervised the construction of "What-If" contract modeling on Avega that resulted in scenarios that maximized HPH contract rates and negotiation power.
- Led the effort to compare actual reimbursement to expected reimbursement that has so far led to approximately \$200,000 in recovered payments.
- Managed the process of designing, updating, and distributing various quarterly contract performance reports to upper management.
- Responsible for a team of four analysts.

7/1999 – 2/2004

Kapiolani Health Hawaii[

Honolulu, HI

**Medical Economics Manager**

- Managed the monthly financials, presented financials to the Board of Directors and State Insurance Division, and ensured solvency for Providers Insurance Corp., HPH's captive insurance company.
- Presented financial results to monthly Board of Directors Meetings and Annual Shareholders Meeting for Physicians Health Hawaii, Inc.
- Managed cash balances, annual budgeting process, physician fee schedules, capitation contracts, IBNP medical cost estimates, RAF receivables, net worth requirements, monthly closings, and reinsurance receivables.
- Managed the implementation of a data warehouse consisting of four separate data systems – streamlining access to medical data for twelve power users.
- Designed and implemented IBNP, enrollment, revenue, RAF, cost model, and various ad-hoc reports for use by top management.

**Education**

University of Hawaii at Manoa

Honolulu, HI

- M.B.A., Finance and Real Estate.
- 3.8 cumulative GPA, Beta Gamma Sigma.
- June 1996: Full scholarship for International Business class in Reims, France.

University of Hawaii at Manoa

Honolulu, HI

- B.B.A., Finance.
- 3.7 cumulative GPA, Dean's List every semester.
- President, Finance Club

**Interests**

Family vacations, church mission trips, kids' activities, exercise.